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000466 7590 04/01/2004

YOUNG & THOMPSON
 745 SOUTH 23RD STREET 2ND FLOOR
 ARLINGTON, VA 22202



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(Signature)
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/875,945	06/08/2001	Ulf Smith	45069	8408

TITLE OF INVENTION: NOVEL SEQUENCES AND THEIR USE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	07/01/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHUNDURU, SURYAPRABHA	1637	536-022100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **YOUNG & THOMPSON**

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

METCON MEDICIN AB

Lidingo, Sweden

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
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- ☐ Advance Order - # of Copies _____

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(Authorized Signature) Benoit Castel (Date) June 22, 2004
 Benoit CASTEL, #35,041

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01 FC:2501
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